



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF SAFETY  
DIVISION OF ADMINISTRATION  
ROAD TOLL BUREAU  
33 HAZEN DRIVE  
CONCORD NH 03305  
TELEPHONE: (603) 271-2302  
TDD Access: Relay NH 1-800-735-2964

FOR OFFICIAL USE ONLY:

CLAIM NUMBER:	
CLASS NO.	NO. MOS.
APPROVED	DISALLOWED
GALS.	GALS.
\$	\$
BY	REASON NO.
DATE	

ROAD TOLL REFUND APPLICATION  
MUNICIPAL AND COUNTY  
GASOLINE ONLY

CITY, TOWN, SCHOOL DISTRICT, VILLAGE DISTRICT OR COUNTY

DEPARTMENT

(OFFICE ADDRESS) STREET

CITY/TOWN

STATE

ZIP CODE

TELEPHONE NUMBER

This is to certify that the above has purchased gasoline upon which the road toll has been paid and the gasoline purchased was subsequently used in motor vehicles owned by the applicant, in accordance with RSA 260:47.

Period of \_\_\_\_\_ yr. \_\_\_\_\_ through \_\_\_\_\_ yr. \_\_\_\_\_

APPLICANT'S CLAIM

1. Total gallons, as per attached invoices	Gals.
2. Total gallons consumed:	Gals.
3. Amount of refund (Line 2 X \$0.18)	\$ _____

ORIGINAL INVOICES, BEARING THE NAME AND ADDRESS OF THE SUPPLIER AND THE NAME OF THE APPLICANT TOGETHER WITH EVIDENCE OF PAYMENT MUST BE ATTACHED. INVOICES CANNOT BE RETURNED TO THE APPLICANT

**Evidence of payment:** Each invoice must be receipted by the supplier as being paid, or if payment is made by check, the date of payment and check number must be supplied.

Per SAF-C 310.01 (f): "Motor fuel claimed on the refund application shall be the actual amount of motor fuel used by the applicant. Application for a refund shall be submitted quarterly by the last day of the first quarter following the last quarter included in the claim in accordance with RSA 260:47, III (a) which requires the same filing period for refunds as the filing deadline for federal excise taxes on fuels." **MINIMUM REFUND IS TEN DOLLARS (\$10.00).**

Evidence of erasures or changes in either the dates, amounts shown in the invoice or evidence of payment shall result in the invoice being disallowed.

Signature \_\_\_\_\_ Title \_\_\_\_\_

"This application is signed under penalty of unsworn falsification pursuant to RSA 641:3."